

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

WOMEN VOTE!

ADDRESS (number and street)

1120 Connecticut Ave, NW

Ste 1100

☐ Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00473918

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Caroline Fines

Signature of Treasurer

Caroline Fines

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WOMEN VOTE!

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
05		01		2012

To:

M M	/	D D	/	Y Y Y Y Y
05		31		2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2012</td></tr></table>	Y	Y	Y	Y	Y	2012						<table><tr><td colspan="5">542315.25</td></tr></table>	542315.25				
Y	Y	Y	Y	Y													
2012																	
542315.25																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">509641.73</td></tr></table>	509641.73															
509641.73																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">151485.00</td></tr></table>	151485.00					<table><tr><td colspan="5">676124.99</td></tr></table>	676124.99									
151485.00																	
676124.99																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">661126.73</td></tr></table>	661126.73					<table><tr><td colspan="5">1218440.24</td></tr></table>	1218440.24									
661126.73																	
1218440.24																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">370372.99</td></tr></table>	370372.99					<table><tr><td colspan="5">927686.50</td></tr></table>	927686.50									
370372.99																	
927686.50																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">290753.74</td></tr></table>	290753.74					<table><tr><td colspan="5">290753.74</td></tr></table>	290753.74									
290753.74																	
290753.74																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**WOMEN VOTE!**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
05 01 2012

To:

M M / D D / Y Y Y Y  
05 31 2012
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

151100.00

578850.00

(ii) Unitemized .....

385.00

97274.99

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

151485.00

676124.99

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

151485.00

676124.99

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

151485.00

676124.99

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

151485.00

676124.99

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	94293.49	444182.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	94293.49	444182.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	75000.00	175000.00
24. Independent Expenditures (use Schedule E) .....	201079.50	308479.50
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	25.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	25.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	370372.99	927686.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	370372.99	927686.50

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	151485.00	676124.99
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	151485.00	676099.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	94293.49	444182.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	94293.49	444182.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

**A. Ms. Mary Ann P. Cofrin**

Mailing Address 29 Mill Lane

City

Amherst

State

MA

Zip Code

01002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / 09 / 2012

Transaction ID : 3266660

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

**B. Gay & Lesbian Victory Fund**

Mailing Address 1133 15th St NW # 350  
5th Floor

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

05 / 15 / 2012

Transaction ID : 3271801

Amount of Each Receipt this Period

125000.00

Full Name (Last, First, Middle Initial)

**C. Ms. Mary Ann Stein**

Mailing Address 5643 Bent Branch Rd

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Moriah Fund

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

05 / 17 / 2012

Transaction ID : 3275606

Amount of Each Receipt this Period

15000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

## **A. E-Enterprise Tech**

Mailing Address 3565 Victor St Ste A

City

Santa Clara

State

CA

Zip Code

95054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2012

**Transaction ID : 3279963**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

## **B. Ms. Sally Ahnger**

Mailing Address 1618 Yale Dr.

City

Mountain View

State

CA

Zip Code

94040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Mission Peak Congregation

Director of Religiou

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2012

**Transaction ID : 3293774**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00

151100.00





<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## WOMEN VOTE!

### A. Melissa Williams

Category/  
Type

40.00

State:  District:

### B. Authorize.net

MM / DD / YYYY

Category/  
Type

64.50

State:  District:

### C. First Data Merchant Services

Category/  
Type

5945.53

State:  District:

6050.03

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## WOMEN VOTE!

### A. Catalyst

Date of Disbursement

Transaction ID : SB21B-111

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

1800.00

Full Name (Last, First, Middle Initial)

## B. Civitas Public Affairs

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B-112

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Number of people

Age

10000.0

Full Name (Last, First, Middle Initial)

**C. New Partners Consulting, Inc.**

Date of Disbursement

Transaction ID : SB21B-113

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

13375.00

**SUBTOTAL** of Disbursements This Page (optional).....

25175.00

**TOTAL** This Period (last page this line number only).....

\_\_\_\_\_

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

**A. Seventh Street Strategies**

Mailing Address 5212 Farrington Rd

City	State	Zip Code
Bethesda	MD	20816

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2012

**Transaction ID : SB21B-114**

Amount of Each Disbursement this Period

10000.00
----------

Full Name (Last, First, Middle Initial)

**B. Melissa Williams**

Mailing Address 15 South Irving Street

City	State	Zip Code
Arlington	VA	22204

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2012

**Transaction ID : SB21B-115**

Amount of Each Disbursement this Period

40.00
-------

Full Name (Last, First, Middle Initial)

**C. Benenson Strategy Group**

Mailing Address 777 Third Ave., 33rd Floor

City	State	Zip Code
New York	NY	10017

Purpose of Disbursement  
Polling/Surveys

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2012

**Transaction ID : SB21B-116**

Amount of Each Disbursement this Period

25500.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

35540.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 21

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

**A. Blueprint Interactive**

Mailing Address 2229 North Pollard Street

City Arlington State VA Zip Code 22207

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 17 2012**Transaction ID : SB21B-117**

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Political Data Inc**

Mailing Address PO Box 1706

City Burbank State CA Zip Code 91507

Purpose of Disbursement  
Publication & Dues

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 17 2012**Transaction ID : SB21B-124**

Amount of Each Disbursement this Period

1167.51

Full Name (Last, First, Middle Initial)

**C. ISSI**

Mailing Address PO Box26054

City Alexandria State VA Zip Code 22313

Purpose of Disbursement  
Polling/Surveys

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 22 2012**Transaction ID : SB21B-125**

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3767.51

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## WOMEN VOTE!

### A. Denise Feriozzi

Date of Disbursement

Transaction ID : SB21B-130

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

162.06

**B.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

162.06

**TOTAL** This Period (last page this line number only).....

94293.49

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

**A. Majority PAC**

Mailing Address 700 13th St NW Ste 600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Committee Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2012

**Transaction ID : SB23-118**

Amount of Each Disbursement this Period

75000.00
----------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75000.00
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75000.00
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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 15 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00473918       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  05 / 17 / 2012 </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 12631.50 </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	
Name of Federal Candidate Supported or Opposed by Expenditure: Michelle Lujan Grisham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 100762.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : SE-6189

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  05 / 17 / 2012 </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 26264.32 </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 26	
Name of Federal Candidate Supported or Opposed by Expenditure: Julia Brownley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 100316.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : SE-6190

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 38895.82 </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
06 / 20 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 16 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00473918       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 21 / 2012         </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10794.51         </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>NM</u> District: <u>01</u>	
Name of Federal Candidate Supported or Opposed by Expenditure: Michelle Lujan Grisham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 22 / 2012         </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           12631.50         </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>NM</u> District: <u>01</u>	
Name of Federal Candidate Supported or Opposed by Expenditure: Michelle Lujan Grisham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         23426.01       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         23426.01       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 17 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00473918       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 22 / 2012         </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           21243.20         </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 26	
Name of Federal Candidate Supported or Opposed by Expenditure: Julia Brownley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 100316.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Transaction ID : SE-6193

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 23 / 2012         </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10794.51         </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	
Name of Federal Candidate Supported or Opposed by Expenditure: Michelle Lujan Grisham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 100762.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Transaction ID : SE-6194

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           32037.71         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">             0.00           </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">             32037.71           </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 18 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00473918	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date MM / DD / YYYY <b>05 / 24 / 2012</b>	
Mailing Address 1720 I Street, NW Ste 550		Amount <b>14979.27</b>	
City Washington	State DC	Zip Code 20006	Transaction ID : <b>SE-6195</b>
Purpose of Expenditure Mailhouse	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>CA</b> District: <b>26</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Julia Brownley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>100316.87</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date MM / DD / YYYY <b>05 / 25 / 2012</b>	
Mailing Address 1720 I Street, NW Ste 550		Amount <b>11288.44</b>	
City Washington	State DC	Zip Code 20006	Transaction ID : <b>SE-6196</b>
Purpose of Expenditure Mailhouse	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NM</b> District: <b>01</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Michelle Lujan Grisham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>100762.63</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>26267.71</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**06 / 20 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 19 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00473918       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 25 / 2012         </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10016.62         </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>NM</u> District: <u>01</u>	
Name of Federal Candidate Supported or Opposed by Expenditure: Michelle Lujan Grisham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 29 / 2012         </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10314.72         </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>NM</u> District: <u>01</u>	
Name of Federal Candidate Supported or Opposed by Expenditure: Michelle Lujan Grisham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         20331.34       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         20331.34       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 20 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00473918       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 29 / 2012         </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           18915.04         </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 26	
Name of Federal Candidate Supported or Opposed by Expenditure: Julia Brownley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 100316.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Transaction ID : SE-6199

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 30 / 2012         </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           12007.16         </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	
Name of Federal Candidate Supported or Opposed by Expenditure: Michelle Lujan Grisham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 100762.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Transaction ID : SE-6200

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           30922.20         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">                     </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">                     </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 21 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00473918       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 30 / 2012         </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           18915.04         </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 26	
Name of Federal Candidate Supported or Opposed by Expenditure: Julia Brownley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 100316.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 31 / 2012         </div>	
Mailing Address 1720 I Street, NW Ste 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10283.67         </div>	
City Washington	State DC		
Purpose of Expenditure Mailhouse	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	
Name of Federal Candidate Supported or Opposed by Expenditure: Michelle Lujan Grisham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 100762.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         29198.71       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         201079.50       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2012